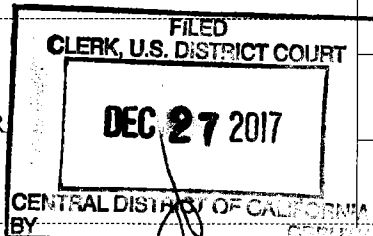


PLAINTIFF UNITED STATES OF AMERICA	COURT CASE NUMBER CV 17-4443 DSF (PLAx)
DEFENDANT ONE PAINTING ENTITLED "NATURE MORTE AU CRANE DE TAUREAU" ETC..ET	TYPE OF PROCESS Complaint/Warrant

SERVE AT { NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

AUSA CHRISTEN A. SPROULE
U. S. COURTHOUSE
312 N. SPRING STREET, 14TH FLOOR
LOS ANGELES, CA 90012



Number of process to be served with this Form 285

Number of parties to be served in this case

Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold

Fold

CATS: 17-FBI-004057; 17-FBI-004058; 17-FBI-004059

PLEASE SEIZE: On painting entitled "Nature Morte au Crane de Taureau" by Pablo Picasso; One collage entitled "Redman One" by Jean-Michel Basquiat; and One photograph entitled "Boy with the Toy Hand Grenade" by Diane Arub.

Signature of Attorney other Originator requesting service on behalf of:

☒ PLAINTIFF

☐ DEFENDANT

TELEPHONE NUMBER

(213) 894-4439

DATE

6/20/17

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process 1	District of Origin No. 12	District to Serve No. 12	Signature of Authorized USMS Deputy or Clerk	Date 6/26/17
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I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☒ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

☐ A person of suitable age and discretion then residing in defendant's usual place of abode

Address (complete only different than shown above)

Date
12/11/17
Time
11:00
☒ am
☐ pm

Signature of U.S. Marshal or Deputy

Service Fee \$65.00	Total Mileage Charges including endeavors	Forwarding Fee	Total Charges \$65.00	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*) \$65.00
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~~50000X~~

REMARKS:

SEIZED 17-FBI-004059 AS CV17-4443 ON DEC 7, 2017.

SEIZED 17-FBI-004057 AND 17-FBI-004058 AS CV17-4443 ON DEC 8, 2017.

PRINT 5 COPIES:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED